STATEMENT OF ORGANIZATION		OFFICE USE ONLY
1. Name and Address of Committee Suddenlink Louisiana PAC 520 Maryville Centre Drive	2. Date of this Statement 3–8–16	Comendment &
Suite 300 St. Louis, MO 63141	3. Estimated Membership	\$/,0
te. Louis, no osiai	200	\$10
		28
	4. Amended Statement?	
Check If: New Committee	X Yes No	
5. All Committee Officers and Directors (including Chairperson, Treasurer	, if any, and any other committee of	fficers and directors)
a. <u>Name</u> b. <u>Position</u> Michael Zarrilli Chairperson	c. <u>Address</u> Same as Committee	
Michael Pflantz Treasurer	Same as Committee	
6. Affiliated Organizations (Any organization, other than a political committee, which directly or incommunications as Name Suddenlink Communications Same as Commit		financially supports this committee.) c. Relationship to Committee Connected Corp
7. All Depositories for Committee Funds (committee funds must be depositunds.)	sited in one or more banks or saving	s and loan institutions or monemarket mutual
a. <u>Name</u> b. <u>Address</u>		2 0
U.S. Bank 721 Locust Street St. Louis, MO 6310	1	
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Che Committee	eck one: Principal Camp	aign Committee Subsidiary
b. Name of Candidate		c. Office Sought by the Candidate
9. a. Name of Person Preparing Report Michael Zarrilli b. Daytime Telephone 314-315-9337	,	2016 MAR
10. WE HEREBY CERTIFY that the information contained in this STATEM	IENT OF ORGANIZATION is true an	
and belief. This Sth day of MATCH		
Signature of Committee Chairperson	3/ Day!	43/59337 2 time Telephone Number
	,	•
1		
molelations	31	43159400

STATEMENT OF ORGANIZATION		OFFICE USE ONLY	
Name and Address of Committee	2. Date of this Statement	PAC	
Suddenlink Louisiana PAC 520 Maryville Centre Drive	1-6-16	5/0	
Suite 300 St. Louis, MO 63141	3. Estimated Membership	1/12	
Devi Books, no ostri	200		
	4. Amended Statement?		
Check If: New Committee	Yes <u>X</u> No	# 896329	
5. All Committee Officers and Directors (including Chairperson, Trea	surer, if any, and any other committee	officers and directors)	
a. Name b. Position	c. Address		
Michael Zarrilli Chairperson	Same as Committee		
Ralph Kelly Treasurer	Same as Committee	•	
Affiliated Organizations (Any organization, other than a political committee, which directly	or indirectly established, administers, o	r financially supports this committee.)	
a. Name b. Address	,,,,	c. Relationship to Committee	
Suddenlink Communications Same as Com	mittee	Connected Corp.	
7. All Depositories for Committee Funds (committee funds must be of funds.) a. Name b. Address U.S. Bank 721 Locust St St. Louis, MO	reet	ngs and loan institutions or money market mutual	
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Specialized			
b. Name of Candidate		c. Office Sought by the Candidate	
9. a. Name of Person Preparing Report		₩. P	
Michael Zarrilli b. Daytime Telephone 314 315-933	7		
10. WE HEREBY CERTIFY that the information contained in this STA and belief.	TEMENT OF ORGANIZATION is true a	nd correct to the best of our knowledge, information	
This oth day of JANUAY 20	<u>016</u> .	9337	
Signature of Committee Chairperson		2/4 3/5 440 ytime Telephone Number	
Alicia St	J:E MA SI HAL BIOS -	1 75 alina	
× / My OKelly	<u> </u>	14 117 1900	
Signature of Committee Treasurer, any	TO THE ROYAL TO DA	ytime Telephone Number	